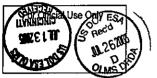
U.S. Department of Labor Office of Labor-Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30 2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

O.M.S. C.		
1 File Number U 96/5	2 Fiscal Year Covered From	
	1 / 1 / 2004 Through 12/31/2004	
3 Name and address of person filing	4 Name file number and address of labor organization	
Name Don Shecry, Jr.	Name Indiana/Kentucky Regional Council	
	Labor Organization File Number 060/14 of Carpenters	
P O Box, Bldg Room No If any	P O Box Building and Room Number if any	
Street 1111 21st Street	Street 2635 Madison Avenue	
City Tell City	civ Indianapolis	
State Indiana ZIP Code + 4 4 758 r 2815	State Indiana ZIP Code + 4 4/6225-2110	
5 Position in labor organization Organizes		
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)		
A Held an interest in engaged in transactions (including loans) with or monetary value from an employer whose employees your organization.	derived income or other economic benefit of on represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income	
Name		
Trade Name If any		
PO Box Bldg Room No If any	RECEIVED	
Street	7 b Amount JUL 0 5 2005	
Oueet		
City	OLMS CINCINNATI	
State ZIP Code + 4		
Signature		
15 Signature and verification. The undersigned declares under penalty of Penury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct and complete (See the section on penalties in the instructions.)		
Signed Den	On 6.28-05 80-5-17-1038 Telephone Number	

Name of Person Filing Don Sherry, 30	File Number U	
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested		
8 Name and address of Business (including trade name if any)	9 Business deals with	
Name	[]	
Trade Name If any	a Labor Organization b Trust	
PO Box Bldg Room No if any	c Employer	
Street		
City		
State ZIP Code + 4		
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing	
Name		
Trade Name if any	,	
PO Box Bldg Room No if any		
Street	11 b Approximate dollar value of such dealing	
City	12 a Nature of interest held or income received	
State ZIP Code + 4		
	12 b Amount	
C Received from any employer (other than an employer covered unde	r parts A and B above)	
or from any labor relations consultant to an employer any payment of money		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)		
Name [Danny Joe Bolin]	In-kind campaign contribution of photography	
Trade Name If any [Bolin Photography]	and advertising 'assistance	
PO Box Bidg Room No If any	to Don Sherry for	
street 607 9th Street	Perry County Commissioner	
City ITell City	on 1/21/04.	
State Indiana ZIP Code + 4 47586		
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment	

ZIP Code + 4 47586

or Consultant

14 b Amount of payment

13 b is the Business an Employer | V

Name of Person Filing Don Sherry, Tr.	File Number U
B Held an interest in or derived income or economic benefit with monetary val substantial part of which consists of buying from selling or leasing to or other of an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	use dealing with the business ely seeking to represent or rectly to or otherwise
8 Name and address of Business (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	9 Business deals with a Labor Organization b Trust c. Employer
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing
Name	1
Trade Name If any	-
PO Box Bldg Room No If any	t t
Street	
City	11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received
State ZIP Code + 4	1
State ZIP Code + 4	12 b Amount
C Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	12 b Amount
C Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 13 a Name and address of Employer or Labor Relations Consultant	12 b Amount r parts A and B above) or other thing of value 14 a Nature of payment
C Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	12 b Amount r parts A and B above) or other thing of value 14 a Nature of payment
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C Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name Mc_Callistec_Construction	12 b Amount r parts A and B above) or other thing of value 14 a Nature of payment Cash Campaign Contribution to
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C Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money 13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name Mc Callister Construction Trade Name if any PO Box Bidg Room No if any Street 1229 13th Street	12 b Amount r parts A and B above) or other thing of value 14 a Nature of payment Cash Campaign Contribution to

Name of Person Filing Don Sherry, Jr.	File Number U	
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested		
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Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	11 b Approximate dollar value of such dealing 12 a Nature of interest held or income received	
	12 b Amount	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value		
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name Danny Joe Bolin Trade Name if any Bolin Photography PO Box Bidg Room No if any Street CO7 9 th Street City Tell City State Indiana ZIP Code + 4 47586	In-kind campaign contribution of photography and advertising assistance to Don Sherry for Perry County Commissioner on 10/2/7/04	
13 b is the Business an Employer or Consultant ?	14 b Amount of payment 400.00	